



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
ALCO-SENSOR IV WITH PRINTER MAINT

RECEIVED

By Carol Day at 1:57 pm, Aug 22, 2016

REPORT #7

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 105445	PRINTER SN 097.3584.347	DATE OF INSPECTION 08/19/2016
LOCATION OF INSTRUMENT (STREET AND CITY) 415 THIRD STREET, PLATTE CITY MO. 64079		TIME OF INSPECTION 11:40 pm

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☒ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

☒ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)

☒ PRINTER WORKING PROPERLY

☒ TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

☒ SIMULATOR SOLUTION

☐ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER GUTH LABORATORIES LOT # 15120 EXP. DATE 04/29/2017

☒ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD2780 SIMULATOR EXP DATE 04/26/2017

☒ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

- ☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 = .104

TEST 2 = .102

TEST 3 = .101

☒ RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS 0 (0-.04) 0 (.05-.09) 0 (.10-.14) 1 (.15-.19) 0 (OVER .19) 0

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

INSPECTING OFFICER

SIGNATURE
William Beeler

PRINT NAME
WILLIAM BEELER

TYPE II PERMIT NUMBER/EXPIRATION DATE
260242 06-17-2018

TELEPHONE NUMBER
(816) 858-2424

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Boulevard
Poplar Bluff, MO 63901

AS IV Serial no: 105445
Version no: 532B

TEST RECORD 00571

Temp Date Time 210L

Air Blank:
08/19/16 23:47 .000
Calibration Check:
24 08/19/16 23:47 .101

Subject Name

3

Subject I.D.

Operator Name, I.D.
William Becker 260242

Location

415 Third Street

Plate City MO

AS IV Serial no: 105445
Version no: 532B

TEST RECORD 00570

Temp Date Time 210L

Air Blank:
08/19/16 23:44 .000
Calibration Check:
23 08/19/16 23:44 .102

Subject Name

2

Subject I.D.

Operator Name, I.D.
William Becker 260242

Location

415 Third Street

Plate City MO

AS IV Serial no: 105445
Version no: 532B

TEST RECORD 00568

Temp Date Time 210L

Air Blank:
08/19/16 23:40 .000
Calibration Check:
22 08/19/16 23:40 .104

Subject Name

1

Subject I.D.

Operator Name, I.D.
William Becker 260242

Location

415 Third Street

Plate City MO

AS IV Serial no: 105445
Version no: 532B

TEST RECORD 00567

Temp Date Time 210L

Air Blank:
08/19/16 23:37 .000
Subject Test: Auto
21 08/19/16 23:37 .000

Subject Name

Blank Test

Subject I.D.

Operator Name, I.D. 260242

William Becker 6/17/18

Location

415 Third Street

Plate City MO

AS IV Serial no: 105445
Version no: 532B

TEST RECORD 00572

Temp Date Time 210L

COID: QP1
12 08/19/16 23:49

Subject Name

RFI

Subject I.D.

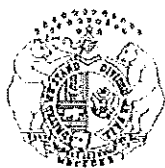
Operator Name, I.D. 260242

William Becker 6/17/18

Location

415 Third Street

Plate City MO



STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT
TYPE II

WILLIAM BEELER

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV WITH PRINTER, INTOX DMT

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 6/17/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 260242

EXPIRES 6/17/2018

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MD 582 0771 (6-10)

LAD 4 (16-10)

STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator BEELER, WILLIAM
Permit No 260242
Date Issued 6/17/2016 Date Expires 6/17/2018



GUTH LABORATORIES, INC.

590 NORTH 57th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 15120 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on May 4, 2015, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1209% (w/vol) ethyl alcohol. The expiration date for this lot number is April 29, 2017 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN08051301 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.